

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>6-8-05</u>		2 Serial/Patent # <u>10/522706</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
✓	Other <u>Fee Code</u> <u>1632 to 1642</u>			\$							
			7 TOTAL AMOUNT OF REFUND		\$ <u>100.00</u>						
			8 TO BE REFUNDED BY:								
			Treasury Check								
			Credit Deposit A/C #:								
			9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">--</td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>					--			
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10 REASON:											
	Overpayment										
	Duplicate Payment										
	No Fee Due (Explanation):										
<u>Fee Code Correction</u>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>B. Campbell</u>			TITLE: _____								
SIGNATURE: <u>BAC</u>			PHONE: <u>606/203 8005</u> <u>BCAMPBELL</u> <small>03/03/2005 07:11 0000104 022135 10582773</small>								
OFFICE: <u>PCT/DO/EO</u>			<small>02 FC:1632 500.00 CR</small>								
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: _____			DATE: _____								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: